Digelegane Depart Cover	Amendme	ent	
Disclosure Report Cover	☐ Yes		No
Use this form for general report and committee information, must be signed and submitted along w	ith other	detailed	forme

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee In	formation						
a. Full Name							c. ID Number
ELE	CT RON	219949					BJH 459
b. Mailing Address		d. Date Filed					
	LEAFMOR						JAN 30, 2019
WAI	CHAW, N	C 28173	3				e. Phone Number
	•						704.942.7788
2. Report Year	3. Period Start	Date (mm/dd/	yy) 4. Period F	and Date (mm	/dd/yy) 5.	Treasure	r Full Name
2019	10/2	2/19	12/	31		RONAL	2APPAS . 9 Q.
6. Type of Com	mittee (Check (pe of repo	rt from one category)
Candidate Cam			Municipal		/County		Referendum
PAC		erendum	Organizationa		Organization	al	Organizational
Independent Ex		nt Fundraiser	Thirty-five day	′	Quarterly		Pre-referendum
Legal Expense	runa		Pre-primary Pre-election		First		Final
7. Type of Fund	(if applicable,	check one)	Pre-runoff	IH	Second Third		Supplemental Final Annual
Booster Fund	(i) applicable,	check one)	Semi-annual	IH	Fourth		Special
Building Fund			Mid Yea	. 🖰 ,	Semi-annual		Special
			Year End		Mid Yea	ar	10. Special Report Name
Other:			Final	17	Year En		10. Special Report I tame
8. Number of Fu	undraisers this	Report	Special		Final	0.0001	
	ø				Special		
11. Account Info	ormation			11. Account		ion	
a. Financial Institut				a. Financial In			
fifth.	THIRD BALL	K.			AI.		
b. Purpose		c. Account Coo	le	b. Purpose	COUNTY	CE	c. Account Code
	. 1	0		b. Purpose COUNTY UNION FINANCE CAMPAIGN FINANCE JAN 30 2020 BECEIVED			
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CERTIFICATI	ON		The Property Control of the Control	った	CEL		
of the NC Gener	al Statutes and th	at no funds are		prohibited or	ns of Articl other non-d	le 22A, 22B lisclosed fur	& 22D-22M of Chapter 163 ands. I further certify that this
RONA	LD D. PAPPA	2	9	rold P.	Pappar	_	JAN 30, 2000
	rinted Name of Sigr	ner	Sig	nature of Appoin	nted Treasure	er	Date
FOR OFFICE U	JSE ONLY	,		~ () .		
Date Receive	ed: <u>O</u>	30/20	Employ	ree: 41/	eyle		<u>very Method</u> Normal Mail
Date Postma	rked:		_ Employ	ree:	<u></u>	凶	Registered Mail Hand Delivered
Date Scanne	d:		Employ	ree:			Electronically Filed
Date Data Er	ntered:		_ Employ	ree:			Signer has not received mandatory training
	assistan	t treasurer, cus	to amend comm stodian of books of Organization	information	or accour	nt informat	

Detailed Summary

Amendment

Yes No

Use this form to summarize all disclosure reporting forms and to total monetary information 3. ID Number 1. Committee Full Name (and Fund if applicable) 2. Type of Report ELECT RON YEAR BUD 8JH459 Total this **Total this** 2019 Start of Election Cycle: January 1, Reporting Period **Election Cycle** 3400 4) Cash on Hand at Start \$ RECEIPTS 5) Aggregated Contributions from Individuals (CRO-1205) \$ 6) Contributions from Individuals (CRO-1210) 45000 \$ 10000 \$ 7) Contributions from Political Party Committees (CRO-1220)8) Contributions from Other Political Committees (CRO-1230)\$ \$ 9) Loan Proceeds \$ (CRO-1410) 10) Refunds/Reimbursements to the Committee (CRO-1240) \$ 11) Other Receipt Sources 11a) Interest on Bank Accounts (CRO-1250)\$ 11b) Contributions from Not-For-Profit Organizations (CRO-1250) \$ 11c) Outside Sources of Income (CRO-1250) \$ 11d) Legal Expense Fund - Other Sources (CRO-1270) \$ \$ 11e) Exempt Purchase Price Sales (CRO-1265) \$ 1000 450° 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e) EXPENDITURES 13) Disbursements 42403 13a) Operating Expenditures (CRO-1310) 436°3 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ 13c) Coordinated Party Expenditures (CRO-1310)\$ 14) Aggregated Non-Media Expenditures \$ (CRO-1315) 15) Loan Repayments \$ (CRO-1420) \$ 16) Refunds/Reimbursements from the Committee (CRO-1320) \$ 17) In-Kind Contributions (CRO-1510) \$ \$ 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 424°3 434.03 \$ 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) \$ 13.97 13.97 ADDITIONAL INFORMATION 20) Non-Monetary Gifts Given to Other Committees (CRO-1330) \$ 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)\$ 22) Debts and Obligations owed by the Committee (CRO-1610) \$ 23) Debts and Obligations owed to the Committee (CRO-1620) 24) Account Transfers Withh Mhe Committee (CRO-1720) JAN 30 2020 25) Administrative Support (CRO-1710) \$ \$ 26) Forgiven Loans \$ (CRO-1440) 27) 48-Hour Notice Reports Sum CEIVED (CRO-2220) \$ \$ 28) Contributions to be Refunded (CRO-1215) \$

Conf	tributions f	rom Individua	alc				Amendment
		individual contribution		contributions	Pg of under \$50 if form CI	 RO 1	Yes No
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(This ii	ne must be on line o	6 of Detailed Summary P	'age CRO-1100)	A STATE OF THE STATE OF			1

			Amendmen	t
Disbursements Pg	0	f 3	☐ Yes	□ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)							2. ID Number		
ELECT	RON P	appar			22		85M 459		
3. Type of Disl	oursement	(Please	use separate CI	RO-1310 forms f	or each type	of Disburs	ement.)		
Operating Exp		☐ Con	tributions to Candida	ates/Political Commi	itees	Coordina	ted Party Expenditures		
4. Payee Inform				☐ Add	Remove				
a. Full Name, N		ess & Pho	one	b. Coord	nated Commit	tee Name	d. Comments		
(include city, state									
A CONTRACTOR OF THE PARTY OF TH	DAUTS			c. Level I	Registered (Spe	cify)			
	72176107			☐ Fede		County:			
MOKHAK	1' MC S	8173		☐ State		Municipality:	e. Election Sum to Date		
							\$ 2.12		
f. Account Code	g. Form of Pa	ayment	h. Purpose Code	i. Date (mm/dd/yy	yy) j. Amount	k. I	Required Remarks		
01	DEBIT	CORD	0	11/04/20	9 \$ 7.17	2 6	DO FOR HERMY		
					\$				
4. Payee Infor	mation			☐ Add	Remove				
a. Full Name, Mai		Phone			nated Commit	tee Name	d. Comments		
(include city, sta									
DUNK	1 DONUT	1		a I aval I	Registered (Spe	oifu)			
8121	KENSING.	E LOT	۷.	Fede		County:	+		
MAKI	4と、して天日といいといい	28173	3	State		Municipality:	e. Election Sum to Date		
40							\$ 9.58		
f. Account Code	g. Form of Pa	ayment	h. Purpose Code	i. Date (mm/dd/yy	yy) j. Amount	k. I	Required Remarks		
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4. Payee Inform	mation			Add	Remove				
a. Full Name, Mai	September 1991 Inches Institution III	Phone		b. Coord	nated Commit	tee Name	d. Comments		
(include city, sta	ate, & zip)								
LERSE	Y HIKE								
1518	KEHSINE	COTO	DR.	C. Level I	Registered (Spe	city) County:			
NUAKU	אבואבואל	28173	3	State		Municipality:	e. Election Sum to Date		
	•				-				
							\$ 23.55		
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01	DEBIT O	ous	0	11/04/201	9 \$ 23.	55	000 Les Pour Workers		
					\$				
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E - Salaries I - Postage		- Equiparies - Penaltic		G - Political Pa K* - Office Ex			ng Public Office Expenses tion to Legal Expense Fund		
O* Other	J	- renam	C 3	K Office Ex	penses	A Dona	non to Legai Expense rund		
	re detailed	explanati	on in required i	remarks field (k					
CD 0 1010			NO	C D. 1 CEL .		The second second	D 1 2000		

					Amendment	
Disbursements	Pg	2	of	3	☐ Yes	☐ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee I	Full Name (and Fu	nd if applicable)			2. ID Number
ELEC	T ROW PAPPAS	•			8JH 459
3. Type of Dish		se use separate CI	RO-1310 forms f	or each type of Di	isbursement.)
Operating Exp	penses Co	ontributions to Candida			Coordinated Party Expenditures
4. Payee Inform			☐ Add	Remove	
	Mailing Address & P	hone	b. Coordi	inated Committee Na	me d. Comments
(include city, state					
MOLLEY	or 9000 or 9000 shay's bake	24	District Co.	Registered (Specify)	
D.6. 130	× 9000		Fede		
HEDLOR	D, Descon 974	ĵo _l	State) IVIUMC	s l(43.14
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01	DEBIT COLD	0	11/08/201		Mark you Gos
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(include city, sta				nated committee	int u. comments
STAPLE	es.		a Lausli		
	SO PROJIDEDUE	2.15	C. Level R	Registered (Specify)	
	DITTE, NC 282		State		
		•			
					\$ 141.34
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy		k. Required Remarks
01	DEBIT COAD	K	11/12/2019	\$ 141.34	Office Supplies
				\$	
4. Payee Inform	nation		Add	Remove	
	ling Address & Phone		b. Coordi	nated Committee Na	me d. Comments
(include city, sta	ite, & zip)				
Papa H	21 pugan		c. Level R	Registered (Specify)	
14015 1	LANCASTER MUY	" C "	Feder		7:
CHARLE	SATE, INC. SEST	W Agen	☐ State		
	co De l	Contract of the Contract of th			\$ 21.41
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	n line 13a of Detailed Su				\$
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7. Purpose C		d expenditure code			
A* - Media	B* - Printi		C* - Fundraisir	ng D-To	o Another Candidate
E - Salaries	F* - Equip	oment	G - Political Par	ty H*-I	Holding Public Office Expenses
I - Postage	J - Penalt	ies	K* - Office Exp		Donation to Legal Expense Fund
O* Other					
* Codes requir	re detailed explanat	tion in required r	emarks field (k)		

					Amendmen	t
Disbursements	Pg	3	of	3	☐ Yes	□ No
Use this form to report expenditures from the committee for operati	na avnanca	contr	ibutic	one to	oondidata/na	litical

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee l	2. ID Number							
	RON PAPP					87M659		
3. Type of Dist		Please use separate C						
Operating Exp	Annual Control of the	Contributions to Candi	dates/Politi		The same of the sa	ordinated Party Expenditures		
4. Payee Inform		a ni		Add	Remove			
· 我就是是一个人的,我们就是一个人的。	Mailing Address	& Phone		b. Coordinat	ed Committee Name	e d. Comments		
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(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)								
7. Purpose C	7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media		Printing		undraising	D - To A	Another Candidate		
E - Salaries		Equipment		litical Party	Н* - Но	olding Public Office Expenses		
I - Postage	J - Pe	enalties	K* - O	ffice Expen	ses Q* - Do	onation to Legal Expense Fund		
O* Other * Codes requir	as detailed eve	lanation in required	nomonka	etala (la)				
Cours requir	re uctanca expi	anation in required	remarks	Held (K)	MACANIA SECTION			